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## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 306812002000 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN OR (Column 1) (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE \$370.00 \$740.00 (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) 20 minus 20 = 0 x\$9.00 OR \$18.00 \$0 INDEPENDENT CLAIMS (37 CFR 1.16(b)) 3 minus 3 = 0 x\$42.00 \$\* OR \$84.00 \$0 \$\* MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) +\$140.00 OR \$280.00 \$0 \$\* TOTAL \*If the different in column 1 is less than zero, enter "0" in column 2 TOTAL OR \$740.00 **SMALL ENTITY** OTHER THAN **CLAIMS AS AMENDED - PART II** OR (Column 3) (Column 2) (Column 1) SMALL ENTITY CLAIMS HIGHEST RATE ADDI-**RATE** ADDI-REMAINING PRESENT NUMBER TIONAL TIONAL PREVIOUSLY AFTER **EXTRA** FEE FEE AMENDMENT PAID FOR AMENDMENT Total Minus (37 CFR 1.16(c)) x\$9.00 \$\* OR \$18.00 \$\* Independent Minus \$\* (37 CFR 1.16(b)) x\$42.00 OR \$84.00 \$\* (37 CFR 1.16(d)) +\$140.00 \$\* OR +\$280.00 \$\* FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL TOTAL ADDIT. FEE \$\* OR ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST RATE ADDI-CLAIMS **RATE** ADDI-PRESENT REMAINING NUMBER TIONAL TIONAL **PREVIOUSLY EXTRA** AFTER **FEE FEE** AMENDMENT PAID FOR AMENDMENT Total Minus (37 CFR 1.16(c)) x\$9.00 \$\* OR \$18.00 \$\* Independent (37 CFR 1.16(b)) Minus x\$42.00 \$\* OR \$84.00 \$\* FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +\$140.00 \$\* OR +\$280.00 \$\* TOTAL TOTAL ADDIT. FEE OR ADDIT. FEE (Column 1) (Column 2) (Column 3)

AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))		Minus		=*
	Independent (37 CFR 1.16(b))		Minus		=*
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

ADDI- TIONAL		RATE	ADDI- TIONAL			
FEE			FEE			
\$*	OR	\$18.00	\$*			
\$*	OR	\$84.00	<b>\$*</b>			
<b>\$</b> *	OR	+\$280.00	\$ <b>*</b>			
\$*	OR .	TOTAL ADDIT. FEE	<b>\$*</b>			
	TIONAL FEE  \$* \$*	TIONAL FEE  \$* OR  \$* OR  \$* OR	TIONAL FEE  \$* OR \$18.00  \$* OR \$84.00  \$* OR +\$280.00  TOTAL			

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.